

Reducing the impact of Asthma on health

Healthy People (HP) 2010 Leading Health Indicator 24-16

PHN contribution to SPA ____'s Public Health Improvement Plan for 2002-____

Assessment:

In SPA ____, data for _____ year shows that asthma related emergency department visits are ____ per 10,000 for children under age 5 and ____ per 10,000 for children and adults aged 5-64 years.

Insert SPA data here that describes the distribution of asthma related emergency department visits showing the distribution by race, ethnic group, gender, immigration status, age, geographic area, etc.

The rates of asthma related emergency department visits differ from or are similar to the countywide profile in the following ways:

Insert SPA/county comparison data here.

Describe the qualitative and quantitative factors that influence the rates of asthma related emergency department visits in SPA _____. Aim to answer the question, "What are the factors that contribute to high rates of asthma related emergency department visits among the _____ population in the SPA?"

Diagnosis:

NOTE: If the SPA can promise improvement in the rates of asthma related emergency department visits for everyone living in the SPA, then so state here. If there are no resources available to promise improvement in all, then under this heading describe in what way rates of asthma related emergency department visits are worse for different groups. For instance, it is ____% overall but ____% for Caucasians (therefore the focus for improvement efforts is on Caucasians).

Identifying Outcomes:

Outcome Objective

By (date)_____, there will be a ____% decrease in the rate of asthma related emergency department visits in _____ population from ____ per 10,000 (SPA baseline for _____ year) to ____ per 10,000. (HP 2010 baseline of 150 per 10,000 in 1995-1997 for children under age 5 and 71.1 per 10,000 for children and adults age 5 to 64 years; HP 2010 target of 80 per 10,000 for children under age 5 and 50 per 10,000 for children and adults aged 5 to 64 years).

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Planning and Action:

Intermediate Objectives

[DEFINITION: Intermediate Objectives link the Outcome Objectives to the Process Objectives. They describe the changes that will occur that ultimately result in or produce the desired outcome. They are precursors to attaining the outcome. Intermediate Objectives have shorter time frames and clearly reflect what can be accomplished and measured within the time period of the program plan. Intermediate Objectives assess measures, which have a high probability of reducing a health problem or increasing resiliency/capacity. These objectives measure the impact of specific interventions designed to achieve the outcome. Intermediate Objectives measure changes in organizations, laws, policies, and power structures at the systems level, changes in community norms, attitudes, awareness, beliefs, practices, and behavior at the community level, and knowledge, attitude, beliefs, values, skills, circumstances, behaviors, and practices at the individual/family level.]

The following are examples of possible/suggested Intermediate Objectives related to reducing asthma related emergency department visits based on best practices from the National Asthma Campaign and Asthma and Allergy Foundation of America.

1. By (date)_____, ___% of the elementary and junior high schools within the _____ population in SPA ____ will have “You Can Control Asthma” education programs.
2. By (date)_____, ___% of the high schools within the _____ population in SPA ____ will have “Power Breathing Programs”.
3. By (date)_____, ___% of the schools within the _____ population in SPA ____ will have “Asthma Care Training for Kids”® available for children and their parents.
4. By (date)_____, ___% of the schools within the _____ population in SPA ____ will have asthma policies in place.
5. By (date)_____, ___% of the schools within the _____ population in SPA ____ will have Asthma Helpline posters placed in locations visible to parents and students.

Using one of the above examples, the following is a demonstration of how the process extends from the Intermediate Objective to the Process Objectives, which describe the action/interventions.

EXAMPLE:

Intermediate Objective 1:

By (date)_____, ___% of the elementary and junior high schools in SPA ____ will have “You Can Control Asthma” education programs, serving the _____ population.

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Process Objective 1:

[DEFINITION: Process objectives are the methods of the intervention. They detail the specific tasks that will be carried out within a specified time frame. Process objectives describes the input; the means by which the intervention or strategy will be implemented. They include inputs, participation, and reactions.]

By (date)_____, PHNs will collaborate with the LAUSD in SPA ____ and the National Asthma Campaign to decide on schools in SPA ____ to target for implementing a *You Can Control Asthma* program. (Minnesota PHN Interventions: Collaboration, Policy Development, System and/or Community, Tertiary prevention)

Process Objective 2:

By (date)_____, PHNs will lobby for funding from the School Board to be allocated for the *You Can Control Asthma* program. (Minnesota PHN Interventions: Advocacy, Policy Development, System, Tertiary prevention)

Process Objective 3:

By (date)_____, PHNs will _____.

And so on...

Under the direction of the SPA Nurse Manager, additional relevant Intermediate Objectives should be developed that address the Outcome Objectives as well as specific Process Objectives that address each Intermediate Objective.

Ultimately, the Outcome Objective of reducing the impact of asthma among the population will *only be achieved if other disciplines and the community* contribute to identifying Intermediate and Process Objectives.

Evaluation

Each Process Objective and Intermediate Objective should have a mechanism to evaluate whether or not the objective was accomplished. This includes a mechanism to track progress toward achieving the Outcome Objective at regular intervals.